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Complete if Known Substitute for form 1449/PTO **Application Number** Filing Date INFORMATION DISCLOSURE First Named Inventor REED, David L. STATEMENT BY APPLICANT Art Unit (Use as many sheets as necessary) **Examiner Name** Attorney Docket Number 03-5261 Sheet 1

U. S. PATENT DOCUMENTS						
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ^{2 (if known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
		^{US-} 6,518,878	02-11-2003	Skoff		
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